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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO
10/602,815	06/25/2003	Shun Takizawa	28-001	1998
23400	7590 08/17/2004		EXAMINER	
POSZ & BETHARDS, PLC			FASTOVSKY, LEONID M	
11250 ROGEF SUITE 10	R BACON DRIVE		ART UNIT	PAPER NUMBER
RESTON, VA 20190			3742	

DATE MAILED: 08/17/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

b.	Application No.	Applicant(s)	0					
Interview Summers	10/602,815	TAKIZAWA ET AL.						
Interview Summary	Examiner	Art Unit						
	Leonid M Fastovsky	3742						
All participants (applicant, applicant's representative, PTO personnel):								
(1) <u>Leonid M Fastovsky</u> .	(3)							
(2) <u>Cynthia Nicholson</u> .	(4)							
Date of Interview: <u>09 August 2004</u> .								
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2)□ applicant's representative]								
Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description:								
Claim(s) discussed: <u>1-20</u> .								
Identification of prior art discussed: <u>no</u> .								
Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.								
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>Applicant must provide the specific information about input/output unit relevant to the invention and amend the specification and claims</u> .								
(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)								
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.								

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required